Thank you, Madam Chair and members of the committee for allowing me to testify on this important piece of legislation.

My name is Chris McEvoy. I have been a Consultant for behavioral support with Wayne County RESA for over 30 years. I also had the privilege of serving on the State-wide Referent Group that was convened in 2004 and which produced the 2006 MDE policy document, <u>Supporting Student Behavior: Standards for the Emergency Use of Seclusion and Restraint</u>.

In my capacity as a behavioral support consultant I provide professional development and technical support around Positive Behavior Interventions & Supports (PBIS) for all public schools in Wayne County. Currently we have over 275 K-12 schools and center-based programs implementing PBIS.

In Wayne County the center-based programs for students with severe autism, dual diagnosis, and day treatment programs for students with severe emotional impairments all implement PBIS. These are, of course, also the programs that are most likely to utilize some seclusion and restraint.

Wayne RESA has done a number of things to help support the implementation of the 2006 state policy, including:

- development of Behavior Intervention Guidelines for functional behavior assessment and designing behavior intervention plans
- an annual series of PBIS trainings,
- and consultation for individual students as needed.

For over 10 years our schools, and in particular our special education programs, have implemented the 2006 MDE policy, and it has served us well. It provides comprehensive guidance and safeguards around the use of seclusion and restraint

as a last resort safety technique for a student whose behavior is truly an imminent risk to the safety of themselves or others.

There are however two major differences between the 2006 policy and the proposed legislation that concern us greatly, and which in our opinion would compromise the safety and well-being of students and staff. The first is the elimination of the individualized student emergency intervention plan and the second is the prohibition on the use of seclusion rooms.

First, the proposed legislation eliminates from the 2006 policy the provision for -

- An individualized student emergency intervention plan (EIP) developed in partnership with parents. This is a plan that would detail the specific deescalation and safety procedures to be used with a student.
- The legislation also eliminates the parents' right to informed consent for use of seclusion and restraint in an EIP. Informed parental consent for use of seclusion or restraint in a safety plan has been a state-wide standard in schools in Michigan for over 20 years. The current legislation would allow for a scenario in which a student could be secluded or restrained any number of times without the school seeking parental consent. This concerns us.
- And the legislation eliminates a provision from the state policy that requires an inquiry of the student's physician regarding any known medical or health contraindications to the use of seclusion or restraint.

The legislation replaces the individualized EIP with a generic district-wide plan, but in our view this is not a sufficient safeguard for students with the most severe and chronically dangerous behaviors. Those students typically need a safety plan tailored to their specific needs, their history, and unique health and medical considerations.

The Emergency Intervention Plan and informed parental consent provide important safeguards for the student, parents, and educational personnel, and should remain as part of legislation that governs seclusion and restraint.

Our experience is that parents want to be involved in this important decision-making process, and that working closely and collaboratively with parents avoids many problems, and creates a far better outcome for the student.

The second concern has to do with the fact that the legislation prohibits emergency seclusion from occurring in seclusion rooms, quiet rooms, or padded rooms. Seclusion rooms are designed specifically to provide to the maximum extent for the safety and overall dignity and well-being of the student. Objects that could be dangerous to the child or used as weapons are removed. (The 2006 policy states that a "room or area used for seclusion must provide for adequate space, lighting, ventilation, viewing, and the safety of the student.")

The legislation however says that emergency seclusion can only be done in what is referred to as the "usual teaching environment" such as a classroom, hallway, lunchroom, gymnasium, or administrative office. To attempt to use emergency seclusion with a student exhibiting extremely explosive and dangerous physical aggression in the "usual teaching environment" is to almost certainly put that student and others at high risk. Seclusion should only be used for a student whose behavior is an "imminent risk to their own safety or that of others." It is imperative that seclusion only occur in an environment designed for the student's safety.

There are a very small number of students with severe emotional/behavioral problems that despite the very best medical, psychiatric, educational, and behavioral interventions continue to display very dangerous behaviors to self and others. In Wayne County we have seen evidence that implementing PBIS with fidelity can

dramatically reduce the use of seclusion and restraint. But there is no evidence that PBIS can eliminate the need for these safety procedures in all cases.

The careful use of seclusion and/or restraint can be an important component of a student's safety plan, allowing the student to function safely in the school environment, and benefit from their educational program. This should be done with the full knowledge and consent of the student's parents.

The 2006 MDE policy is recognized nationally as one of the best policies of its kind. It is clearly written, grounded in research and evidenced-based practices, and provides excellent guidance and safeguards for students, parents, and school personnel.

It was also developed by a statewide referent group comprised of a wide range of representative stakeholders.

We recommend keeping the content of the policy intact in this legislation.

Chris McEvoy, Wayne RESA Consultant for Behavior Support

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